

TO: Medical Assistance Providers

FROM: Susan J. Tucker Joseph E. Davis
Executive Director Executive Director
Office of Health Services Office of Operations, Eligibility & Pharmacy

NOTE: Please ensure that appropriate staff members in your organization and other appropriate contacts are informed of the contents of this transmittal

RE: HIPAA Contingency Plan Ends

DATE: August 19, 2005

The Maryland Medical Assistance Program is ending our Health Insurance Portability and Accountability Act (HIPAA) Contingency Plan from October 2003. We are contacting providers who are still submitting claims using a non-HIPAA compliant format (the dial-up billing software, PROVAV).

HIPAA mandates Electronic Data Interchange format standardization for health care data transmission, including claims, remittance, eligibility, and claim status inquiries. HIPAA regulations replace the electronic CMS-1500 (HCFA-1500) and UB92 claim formats, with ANSI ASC X12N 837 Transactions, version 4010A.

According to our research, you have not submitted claims in a HIPAA-compliant electronic format during 2004 or 2005.

The Maryland Medical Assistance Program will end the HIPAA contingency plan for billers on December 2, 2005.

Beginning December 2, 2005, you must submit claims in a HIPAA-compliant format.

STEPS TO MOVE TOWARD HIPAA COMPLIANCE:

HIPAA Enrollment Forms

Trading Partner Agreement (TPA) and Submitter Identification Form (SIF)

We must have a signed Trading Partner Agreement (TPA) on file before we accept HIPAA transactions and a completed and signed Submitter Identification Form (SIF)

before claims are submitted for payment. The forms can be found on the DHMH website and are available at:

<http://www.dhmf.state.md.us/hipaa/transandcodesets.html>

Pay-To Providers (Providers who receive a check directly from the State of Maryland): The Program must have both the Trading Partner Agreement and Submitter Identification Form on file before accepting any HIPAA transactions including X12N 837 (Claims).

Rendering Providers (Providers who do not receive a check from the State of Maryland, but instead receive payment through a group practice): The Program must have the Trading Partner Agreement on file before we accept any HIPAA transactions such as the X12N 270/271 (Eligibility Inquiry and Response).

Each form has a contact phone number if you have additional questions or if you are unclear which forms you are to fill out. It is imperative that you complete the necessary form(s) and return them prior to submitting electronic transactions. Please mail the forms to:

Rita Tate
201 W. Preston Street Rm. LL3
Baltimore MD 21201
Attn: HIPAA Billing Agreements

Companion Guides

Companion Guides, developed by the Department of Health and Mental Hygiene (DHMH) to assist Information Technology staff and billing software vendors with the ASC X12N Transactions, can be found at:

<http://www.dhmf.state.md.us/hipaa/transandcodesets.html>.

Testing

Providers who send electronic transmissions directly to Medicaid must test for HIPAA compliance before they can transmit actual claims. DHMH offers free testing for its trading partners: <http://www.dhmf.state.md.us/hipaa/testinstruct.html>. This testing tool provides information on test files and errors. *Please note that testing often takes at least a month. If you have not started testing, START NOW to avoid cash flow problems.*

If you have any questions regarding HIPAA testing, please send an email to:

hipaaeditest@dhmf.state.md.us.

If you have begun the testing process, please disregard this notice.